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02 FC:1504 03 FC:8001				<u> </u>	(S	ignature) (Date)			
APPLICATION NO.	FILING DATE	FI	IRST NAMED	INVENTOR		ATTORNEY DO	OCKET NO.	CONFIRMATION	NO.
10/625,538	07/24/2003		Jun-Ichiroh	Fujimoto		R2184.0065	/P065-A	8207	
TITLE OF INVENTION: (SPECIFIC EVENT OCCUI	OFFICE INFORMATION S RS	YSTEM HAVING A	A DEVICE V	WHICH PROVIDE	ES AN OPE	RATIONAL M	ESSAGE OF	THE SYSTEM W	HEN A
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	Ε	PUBLICATION	N FEE	TOTAL FEE	(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300		\$170	00	07/06/2005	
EXAMINER ART		ART UNIT	VIT CLASS-SUBCLASS]				
TRAN,	HOAN H	2852	2 399-008000						
1. Change of correspondence CFR 1.363). Change of corresponded corres	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				ein Shapiro & Oshinsky	<u>)</u>		
	O RESIDENCE DATA TO E s an assignee is identified b n 37 CFR 3.11. Completion			4 ,,	If an assign nent.	uee is identified	below, the do	ocument has been f	iled for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Ricoh Compar	ny, Ltd.		Tokyo,	Japan					
Please check the appropriat	e assignee category or catego	ries (will not be prin	ited on the pa	tent): 🗖 Indivi	dual 🖾 Co	orporation or oth	ner private gro	up entity 🖵 Gove	mment
4a. The following fee(s) are Issue Fee Publication Fee (No and Advance Order - # o	ed)	b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 04-10/3 (enclose an extra copy of this form).							
	(from status indicated above	=)		ant is no longer clai					
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) ords of the United States Pat	ue Fee and Publication will not be accepted that and Trademark C	on Fee (if any from anyone Office.	y) or to re-apply ar other than the appl	ny previousl licant; a regi	y paid issue fee istered attorney	to the applicator agent; or th	tion identified above e assignee or other p	e. party in
Authorized Signature	MA			I	Date	July 6, 2	005.		-
Typed or printed name _	Mark J. Thronso	on		I	Registration	No. 33,	0.82:		
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.3 lity is governed by 35 U.S.C pplication form to the USPT s for reducing this burden, slinia 22313-1450. DO NOT-1450.	11. The information 122 and 37 CFR 1. O. Time will vary d nould be sent to the SEND FEES OR CO	is required to 14. This colle epending upo Chief Inform DMPLETED	o obtain or retain a ection is estimated on the individual c ation Officer, U.S. FORMS TO THIS	benefit by to take 12 pase. Any con Patent and SADDRESS	the public which minutes to comp omments on the Trademark Offi S. SEND TO: Co	is to file (and plete, including amount of tince, U.S. Depa commissioner f	by the USPTO to p g gathering, prepari ne you require to co rtment of Commerc or Patents, P.O. Bo	ng, and implete ice, P.O. x 1450,

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Effective on 12/08/2004.	Complete if Known												
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R			10/625,538-Conf. #8207										
FEE TRANSMITTAL	Filing Date	1.1.04		4, 2003									
	First Named Inv	entor J	un-ichiroh F										
For FY 2005	Examiner Name	H	H. H. Tran										
Applicant claims small entity status. See 37 CFR 1.27	Art Unit 2852												
TOTAL AMOUNT OF PAYMENT (\$) 1,703.00	Attorney Docket No. R2184.0065/P065-A												
METHOD OF PAYMENT (check all that apply)													
Check X Credit Card Money Order None Other (please identify):													
x Deposit Account Deposit Account Number: 04-1073 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17													
FEE CALCULATION													
1. BASIC FILING, SEARCH, AND EXAMINATION FEE	S												
FILING FEES	SEA	ARCH FEES	EXAMIN	ATION FEES									
Small Entity Application Type Fee (\$) Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)							
Utility 300 150	500	250	200	100									
Design 200 100	100	50	130	65									
Plant 200 100	300	150	160	80									
Reissue 300 150	500	250	600	300									
Provisional 200 100	0	0	0	0									
2. EXCESS CLAIM FEES		•				Small Entity							
Fee Description					Fee (\$)	Fee (\$)							
Each claim over 20 (including Reissues)			50	25									
Each independent claim over 3 (including Reissues)				200	100								
Multiple dependent claims					360	180							
Total Claims	Total Claims					Multiple Dependent Claims							
20 = x =		Fee (\$) Fee Paid (\$)											
Indep. Claims Extra Claims Fee (\$)	Fee F	Paid (\$)		 -		-							
3. APPLICATION SIZE FEE	-												
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer													
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).													
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)													
100 = /50 (round up to a whole number) x =													
4. OTHER FEE(S) Fees Paid (\$)													
Non-English Specification, \$130 fee (no small entity discount)													
Other (e.g., late filing surcharge): 1501 Utility issu	1,400.00 nal 300.00												
8001 Printed-copy of patent w/o color 3.00													
SUBMITTED BY													
Signature MA	~	Registration No. (Attorney/Agent)	33,082 50,515	Telephone	(202) 775	(202) 775-4742							
Name (Print/Type) Mark J. Thronson Gabriela I. Coman				Date	July 6, 2	2005							